



HEALTH ADVISORY #0093

Widespread Influenza Activity in West Virginia

TO: West Virginia Healthcare Providers, Hospitals and other Healthcare Facilities
FROM: Rahul Gupta, MD, MPH, FACP, Commissioner for Public Health and State Health Officer, WVDHHR, Bureau for Public Health

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LOCAL HEALTH DEPARTMENTS: PLEASE DISTRIBUTE TO COMMUNITY HEALTH PROVIDERS, HOSPITAL-BASED PHYSICIANS, INFECTION CONTROL PREVENTIONISTS, LABORATORY DIRECTORS, AND OTHER APPLICABLE PARTNERS

OTHER RECIPIENTS: PLEASE DISTRIBUTE TO ASSOCIATION MEMBERS, STAFF, ETC.

Influenza activity is currently high in the United States and West Virginia is reporting widespread influenza activity. The state is experiencing a significant increase in visits for influenza-like illness (ILI) from outpatient and emergency department settings and multiple outbreaks have been confirmed in long term care facilities (LTCF). This season, influenza A (H3N2) viruses have been most frequently reported in West Virginia.

During past seasons when influenza A (H3N2) viruses have predominated, higher overall and age-specific hospitalization and mortality rates have been observed, especially among older people, very young children, and persons with certain medical conditions. For example the Centers for Disease Control and Prevention (CDC) estimates that an average of 28,909 people die from flu during H3N2 predominant seasons, compared to 10,648 people during non-H3N2 predominant seasons. Additionally, more than two-thirds of the influenza A (H3N2) viruses analyzed since October are genetically different from the H3N2 vaccine virus component this season. The vaccine may not work as well against these different H3N2 viruses.

At this time providers should bear in mind these major recommendations:

- Influenza vaccination is recommended for any persons who have not been vaccinated yet this season, as vaccine may still offer benefit. This includes people who may have already gotten the flu this season; flu vaccine protects against three or four different viruses and it's possible that other viruses will circulate later in the season.
- Healthcare providers should empirically give prompt treatment with antiviral medications to persons with suspected or confirmed influenza who are hospitalized; have severe or progressive illness; or are at increased risk for influenza complications. A summary of the most current antiviral recommendations for clinicians can be found on the Centers for Disease Control Website at: <http://www.cdc.gov/flu/professionals/antivirals/summary-clinicians.htm>.
- Guidelines for management of outbreaks in LTCF are found at: <http://www.dhhr.wv.gov/oeps/disease/flu/documents/flu-guidelines-ltcf.pdf>. During an outbreak of influenza LTCF residents should be prophylaxed with antiviral agents to prevent ongoing transmission and complications.

For more information, contact your local health department or DIDE at (800)-423-1271, ext. 1 or (304)-558-5358, ext. 1. Up to date information on influenza, including current surveillance data is available at:

www.dide.wv.gov

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